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INSTITUTION Kansas Action for Children, Inc., Topeka.

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ABSTRACT

This document uses a school report card format to present information on the current well-being of Kansas' children. "Grades" are based on 17 indicators of well-being in five areas: (1) safety and security (violent crime, child abuse and neglect, and childhood poverty); (2) health (early prenatal care, low birthweight, infant mortality, and immunizations); (3) education (high school completion, achievement scores, and school readiness); (4) teen years (teen birth rate, substance abuse, and teen violent death); and (5) child care (quality, cost to parents, capacity, and resource and referral). Findings indicate that the rates of violent crimes and teen homicide continue to improve. The rate of substantiated child abuse and neglect worsened. Childhood poverty as indicated by free school meal data has stabilized over the last 3 years. The percentage of live births for which the mother had early prenatal care improved each year for the past 3. There was a slight decrease in low birthweight newborns and a notable decline in infant mortality. Kansas continued to improve the rate at which children are fully immunized by age 2. The state's high school graduation rate far exceeds the national average, and achievement scores are stable. The teen birth rate dropped from 1999 to 2000. With only one exception for marijuana, there were declines in eighth and twelfth graders' substance usage. Child care capacity continues to shrink as child care in Kansas becomes more expensive. The overall grade given for the well-being of Kansas' children was C+. A description of how the grades are determined is included. (KB)

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Kansas Action for Children, Inc.

December 2001

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KANSAS CHILDREN'S REPORT CARD

Report on the Status of Children

State of Kansas receives a

grade of C+ Ages: 0-19 Year: 2001

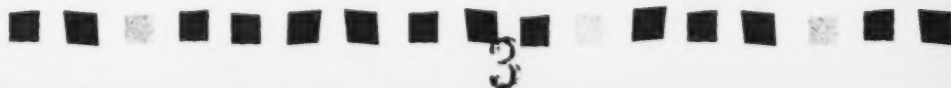
Parents/Guardians: Citizens of Kansas

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C+

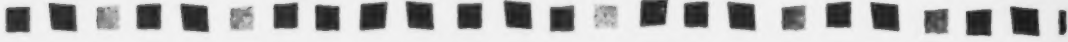
Kansas Action for Children Inc.

RS



Forward

...it just takes you.



It doesn't take a rocket scientist to respond to our children's needs.

All children have some basic needs, including shelter, food, health care and education. To meet some of those needs, we depend on experts. We want trained teachers and nurses educating and providing health care for our children, not amateurs.

But children need much more than experts.

Recently, 3,500 Kansas children and youth responded to the question, "What is it you need from adults to grow up healthy and safe?" This is what they said:

- We need parents and other adults actively engaged in our lives.
- We need adults to spend time with us and to listen to us.
- We need adults to provide guidance and discipline, set boundaries for our behavior and support appropriate risk-taking.
- We want unconditional love, acceptance and respect.
- We need to feel safe and secure.
- We need support from adults.

Clearly, it doesn't take an expert to do the things on this list. We can all spend time with, and listen to, children. We can all support them in many ways. It takes no special training to respect, accept and unconditionally love children.

We hope this fourth annual report card on the well-being of Kansas children prompts adults across the state to reflect on how we can respond to what children and youth are asking for.

Children don't need rocket scientists. They need us.

Becky Holmquist, President
KAC Board of Directors

Gary Brunk
KAC Executive Director

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2001 Grade Safety & Security

B-

Violent Crime

The rate of violent crimes such as murder, rape and aggravated assault continues to improve in Kansas. In 1999, 10,159 violent crimes were committed, a rate of 383 violent crimes per 100,000 persons, a reduction from 1998 (420 per 100,000) and 1997 (430 per 100,000). The state's violent crime rate is substantially below the national rate of 525 and is within 15% of the Year 2010 Goal. [Year 2010 Goal: 325 per 100,000]

Child Abuse & Neglect

The rate of substantiated child victims of abuse and neglect worsened, increasing from a rate of 9.7 per 1,000 children in 1998 to 12.4 per 1,000 children in 2000. The Kansas Department of Social and Rehabilitative Services substantiated 8,729 reports of child abuse and neglect last year. The state's rate is higher than the national rate of 11.8 per 1,000 and would have to be reduced by 17% to reach the Year 2010 Goal. [Year 2010 Goal: 10.3 per 1,000 children]

Childhood Poverty (Free School Meal Data)

The percent of Kansas schoolchildren who qualified for free school meals because their family income was either at or below 130% of the federal poverty level has shown a stabilizing trend during the last three years. In 2000, 24% of Kansas schoolchildren qualified for free school meals, well below the national average of 32.5%. [Year 2010 Goal: 18%]

Health

2001 Grade

A-



Early Prenatal Care

The percentage of all live births for which the mother had at least one visit to a doctor in the first trimester has improved each year for the past three years (1998-2000). The 2000 percentage increased to 87 percent from 85.8% in 1999, which increased from 85.7% in 1998. Kansas continues to perform better than the nation (83%) on early prenatal care. [Year 2010 Goal: 90%]

Low Birth Weight

Kansas reduced the percentage of all live births of babies weighing less than 2,500 grams (5.5 pounds) in 2000. This percentage fell to 6.9% in 2000 from 7.1% in 1999, which was a very slight increase from 1998 (7%). Kansas remains beneath the national percentage of 7.6%. [Year 2010 Goal: 5%]

Infant Mortality

Kansas experienced a notable decline in infant mortality during 2000, with a total of 266 infant deaths and a rate of 6.7 per 1,000 live births. The data show a stabilizing trend. Preliminary national data show that Kansas maintains an infant mortality rate at the same level as the nation as a whole. [Year 2010 Goal: 4.5 deaths per 1,000 live births]

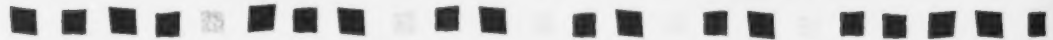
Immunizations

Kansas in 2000 continued to improve the rate at which children are fully immunized by age 2, climbing to 77.1%. This is up from 74.9% in 1999, which also was higher than the 1998 rate of 71.1%. While Kansas' 2000 immunization rate is below the 78% national average, it continues to make headway. [Year 2010 Goal: 90%]

2001 Grade

Education

A



High School Completion

In the 1999-2000 school year, 83% of students who had been ninth-graders four years earlier graduated from high school, an improving trend that far exceeds the national average of 66.9%. [Year 2010 Goal: 90%]

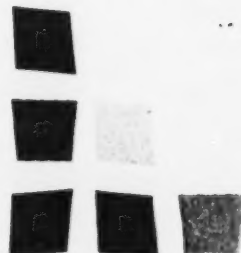
Achievement Scores

The average composite score of the 24,380 Kansas students who took the ACT in 2000/2001 did not change from the 1999/2000 average of 21.6. This stable trend exceeds the national composite score of 21. [Year 2010 Goal: 24.2%]

School Readiness

Trend information for this benchmark is not available because Kansas schools do not uniformly collect school readiness data. [Year 2010 Goal: 100% of children will enter school ready to learn.]

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Teen Years



Teen Birth Rate

The Kansas teen birth rate dropped to 44.7 per 1,000 teen women ages 15-19 in 2000, down from 47.3 in 1999. This is a stabilizing trend that is better than the national rate of 48.7 per 1,000 teen women but far short of the Year 2010 Goal. [Year 2010 Goal: 35 births per 1,000]

Substance Abuse

With only one exception, Kansas showed declines in combined (eighth- and 12th grades) usage for all substances. Only marijuana increased, from 9.3% to 12.3%. The state's combined usage exceeds national usage on five out of eight of the substances: Alcohol, 40.4% vs. 34.3% nationally; Cocaine, 2% vs. 1.6%; Inhalants, 4.7% vs. 3.5%; LSD, 2.1% vs. 1.3%; and Smokeless Tobacco, 8.4% vs. 5.7%. Kansas' usage is lower than national usage for: Amphetamines, 1.5% vs. 4.1% nationally; Cigarettes, 20.2% vs. 21.8%; and Marijuana, 12.3% vs. 14.5%. Kansas achieved one of four Year 2010 Goals (Cigarettes). [Year 2010 Goal: Cigarettes, 20%; Alcohol, 12.6%; Marijuana, 3.2%; Cocaine, 0.6%]

Teen Violent Death

The teen death rate due to motor vehicles is worsening. The 2000 motor vehicle death rate is up to 36.1 per 100,000 from 35.2 in 1999, and 28.5 in 1998. The teen suicide rate shows a stabilizing trend, dropping to a rate of 10.2 in 2000 after an increase in 1999 (15.5) over 1998's rate of 11.4. By contrast, the homicide rate has improved each of the last two years, dropping from 14.7 per 100,000 in 1998 to 12.2 in 1999 then to 6.9 in 2000. [Year 2010 Goal: 0 homicides and suicides and 20 deaths by motor vehicle accident per 100,000 teens]

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How Grades are Determined



To ensure consistency in data analysis, the report card uses three grading factors: trend analysis, comparison to national scores and comparison to Year 2010 Goals.

Grading Process

Points are assigned to individual benchmarks (e.g., teen violent death, prenatal care) for each grading factor. The total number of points received for all three grading factors, divided by the total number of points available for that benchmark, yields the benchmark percentage score. All benchmark percentage scores within a category (e.g., health, education) are averaged together to determine the category's score. That category then is assigned a letter grade according to the following chart.

A = 80-100 percent

B = 60-79 percent

C = 40-59 percent

D = 20-39 percent

F = Less than 20 percent

I = Incomplete: data insufficient to assign grade

The chart is again used to assign the overall grade, which is an average of the category percentages.

Data definitions and full data notes are available at www.kac.org and the Kansas Action for Children office.

Child Care

Kansas child care providers known to the Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA) were surveyed on the four indicators defined below. Comparable national data is not available for any of these four benchmarks.

Quality

Staff-to-child ratios for Kansas were: infants, 1:3; toddlers/preschoolers, 1:7; school-age children, 1:9, a stabilizing trend. Average entry-level state wages were \$10.46 for directors, \$8 for teacher/directors, \$6.50 for assistant teachers and \$6 for assistants, all improvements. [Year 2010 Goal: No goal set]

Cost to Parents (Affordability)

The percent of median household income spent on child care was 14.5% for infants, 12.5% for toddlers/preschoolers and 9.9% for school-age children. Child care is becoming more expensive in Kansas, a worsening trend. [Year 2010 Goal: The median cost for an infant will be equal to, or less than, 10% of median household income.]

Capacity

Child care capacity continues to shrink in Kansas, a worsening trend. In 2001, 128,045 child care slots existed, compared to 130,097 in 2000 and 132,827 in 1999. [Year 2010 Goal: No goal set]

Resource and Referral

KACCRRRA reports their member agencies handled 21,886 calls requesting child care information in 2001, a stabilizing trend. [Year 2010 Goal: No goal set]

2001 SUMMARY OF GRADES

CATEGORY	2001
SAFETY AND SECURITY	B-
Violent Crime	
Child Abuse & Neglect	
Childhood Poverty	
HEALTH	A-
Early Prenatal Care	
Low Birth Weight	
Infant Mortality	
Immunizations	
EDUCATION	A
High School Completion	
Achievement Scores	
School Readiness	
TEEN YEARS	C-
Teen Birth Rate	
Substance Abuse	
Teen Violent Death	
CHILD CARE	D
Quality	
Cost to Parents	
Capacity	
Resource & Referral	
OVERALL GRADE	C+

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Kansas Action for Children: Our Work

Kansas Action for Children Inc. is an independent, nonpartisan, citizen-based corporation founded in 1979. We do not enter into contracts with, nor receive funding from, government agencies. We work on behalf of all children to ensure that their physical and emotional needs are met and that they become healthy, contributing adults.

- We *paint the picture* of Kansas children by gathering and publicizing information on child well-being through the *Kansas Children's Report Card*, the *Kansas KIDS COUNT Data Book*, and special reports.
- We *advance alternatives* by developing state policy that is family and child friendly. Over the years, programs related to early childhood development, teen pregnancy, preventive health care, citizens review boards, and services to children in troubled families have stemmed from our work.
- We *build the base* of citizen advocacy for children by working with citizens and organizations across the state. We believe that hundreds of citizens speaking out for children will help create communities that support families and children.

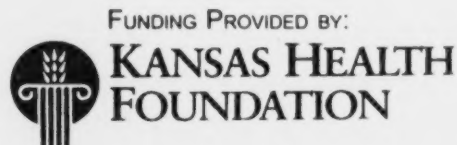
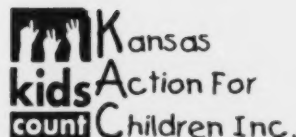
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